

This overview of the comprehensive eight-step Source Book highlights the information you could have at your fingertips - absolutely FREE - by becoming a participant in The Accommodation Program®.

Step 1

The Accommodation Program

Familiarizes you with The Accommodation Program and what it means to your business, your revenue, and your guests.

Step 2

Designating Rooms for Non-Smokers and Smokers

Helps you determine the percentage of total inventory for allocating rooms for non-smokers and smokers.

Step 3

Enhancing Customer Service and Handling Customer Complaints

Includes suggestions on how to accommodate guests at the registration desk, how to be an accommodating bell person or owner/manager, and how to be prepared to handle guest complaints.

Step 4

Enhancing Your HVAC System

Explains how to enhance air quality throughout your hotel for maximum guest comfort. Also includes an 800-number directly connecting you with HVAC engineers who can discuss strategies for enhancing your HVAC system.



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Step 5

A Guide for Hotel Restaurants and Lounges

Offers suggestions for arranging your seating and table settings and training your staff.

Step 6

Know Your Local/State Laws

Suggests where to find information on specific smoking regulations in your area.



Step 7

Signage

Explains where and how to use The Accommodation Program signage in your hotel to communicate the smoking policy to your guests.

Step 8

Public Relations

Helps you promote your enhanced guest accommodations through the media.



If you found this overview helpful and would like to receive the complete 51-page Hotel Source Book - and much more - just fill in, detach, and mail the reply card in this booklet or
call 1-800-929-1414.

Courtesy of Philip Morris Incorporated

YES, I'd like to participate in
The Accommodation Program®.

Please send me FREE signage and program materials.



Your Name (Please print clearly) _____

Your Title _____

Business Name _____

Business Address (no P.O. boxes please) _____

City _____ State _____ Zip _____

Phone _____ Fax _____

(Check All That Apply)

Restaurant: ☐ Fine Dining ☐ Midscale ☐ Quick Service
☐ Hotel ☐ Bowling Center ☐ Shopping Mall ☐ Stadium/Arena
☐ Bar/Tavern ☐ Airport ☐ Association ☐ Casino
☐ Other (Please Specify) _____

Chain Operator ☐ Local ☐ Regional ☐ National

☐ Independent Operator

Number of Locations _____

☐ Yes, you may use my establishment's name as a participant of The Accommodation Program in promotional materials and advertising per my signature below.

Signature _____